1080000005932

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
. (Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	UNT
	YAM	- 6 5010
!	EXA	MINER

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SECRETARY OF STATE

COVER LETTER

10;	Registration Sect Division of Corpo					
SUBJE	CT:	Total Equipm	ent Company, LLC			
SOBSE	C1		ed Liability Company			
The enc	losed Articles of A	mendment and fee(s) are sub	nitted for filing.			
Please r	eturn all correspond	lence concerning this matter t	to the following:			
			Darren Baxley			
			Name of Person			
		Total E	quipment Company, LLC			
			Firm/Company			
		5	606 Downing Street		2010 KAY -4 Segretar Tallahass	
			Address		AR B	٦
•		D	over, Florida 33527			רורכט
			City/State and Zip Code		PA PA	П
		tot	alequipco@aol.com	 	FLOR	C
			be used for future annual report notification	tion)	용품	
For furt	her information con	cerning this matter, please ca	11:		A	
V	Vendy Harknes	ss (Registered Agent)	at (813) 50	04-2336		
Name of Person		Person	Area Code & Daytime T	elephone Number	-	
Enclose	d is a check for the	following amount:				
•	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (of Status &	
	Registrati	G ADDRESS: ion Section of Corporations	STREET/COURIER Registration Section Division of Corporati			

Pd ch # 2314 ant \$ 60.00 Included

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Total Ed	uipment Company,	LLC
(Name of the Limited Liai (A Flor	ollity Company as it now app ida Limited Liability Company	pears on our records.) y)
The Articles of Organization for this Limited Liabili	ty Company were filed on _	January 16, 2008 and assigned
Florida document numberL08000005932	<u>2</u> .	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company l	<u>here</u> :
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Cor	mpany," the designation "LLC" or the abbreviati
Enter new principal offices address, if applicable	:	2010 SE1 FALL
(Principal office address MUST BE A STREET AI		AR E T
		ASSET -
F-4		The Republic
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
B. If amending the registered agent and/or re	egistered office address o	n our records, enter the name of the ne
registered agent and/or the new registered office		
Name of New Registered Agent:		
New Registered Office Address:		
		Enter Florida street address
_		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM =	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Michael R. O'Neal	5606 Downing Street, Dover, FL 33 - and/or - 752 Gran Kaymen Way Apollo Beach, FL 33572	527 □ Add ☑ Remove
MGR	Karen Baxley	5606 Downing Street, Dover, FL 33	527 🗸 Add Remove
			TO Remove
			ASSET Remove
			□ □ Remove
	Anti-manifelia della		Add Remove
D. If amer	nding any other information, enter o	change(s) here: (Attach additional sheets, if necessar	y.)
·			
-			-
Dated <u>/ 7</u>	John & Bart	2 909 . Spinber or authorized representative of a member	
	Darron F Baxle	Typed or printed name of signee	
		,	

Page 2 of 2

Filing Fee: \$25.00